



04-02+10

JFW

**REQUEST FOR WITHDRAWAL AS
ATTORNEY OR AGENT AND CHANGE
OF CORRESPONDENCE ADDRESS**

Application No.	10/064,974
Filing Date	09/05/2002
First Named Inventor	Jim Skufca
Art Unit	2161
Examiner's Name	Chelcie Daye
Atty. Docket No.	INIT1120-1

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ All the attorneys/agents of record
☐ The attorneys/agents (with registration numbers) listed on the attached papers(s), or
☒ The attorneys/agents associated with Customer Number **44654**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Applicant requested file be transferred to new counsel

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Stuart B. Shapiro Edell, Shapiro & Finnan, LLC		
Address	1901 Research Blvd., Suite 400		
City	Rockville	State MD	Zip 20850
Country	U.S.		
Telephone	(301) 424-3640	Email	
Signature			
Name	Ari G. Akmal	Reg. No.	51,388
Date	4-1-10	Telephone No.	512-637-9220

NOTE: Withdrawal is effective when approved rather than received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.